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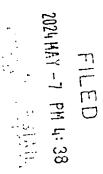
		
(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER --- .

•	gistration Section vision of Corporations		, *
SUBJECT	DHF NURSE, PLLC		
		Name of Limited L	iability Company
Dear Sir or	Madam:		
The enclose	ed Registered Agent/Registered (Office Change and	fee(s) are submitted for filing.
Please retur	rn all correspondence concerning	this matter to the	following:
Dahana For	rgues		
	Name of Person	· · · · · · · · · · · · · · · · · · ·	
DHF NURS	SE, PLLC		
	Firm/Company		
4540 NW 3	2nd Street		
	Address	-	
Lauderdale	Lakes, FL 33319		
	City/State and Zip Cod	le	
dh.nurse8@)gmail.com		
E-ma	il address: (to be used for future	annual report notif	ication)
For further	information concerning this mat	tter, please call:	
Dahana For	rgues	954 at (826-7924
	Name of Person		Area Code & Daytime Telephone Number
Re Di P.0	egistration Section vision of Corporations O. Box 6327 Illahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
En	iclosed is a check for the follow	ing amount:	
Ø	\$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	<u> </u>	(0)	
	Principal office address of limited liability company:		,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	(<i>Note: MUST BE STREET ADDRESS</i>) 4540 NW 32nd Street		4540 NW	32nd Street
				<u> </u>
	Lauderdale Lakes, FL 33319		Lauderdale	: Lakes. FL 33319
	April 6, 2022		L220001657	710
	Date of filing/registration in Florida	4.		Document number
(a)	United States Corporation Agents, Inc.			
(a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- ::
	United States Corporation Agents, Inc.			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS		-
	476 Riverside Ave.,			
	Jacksonville	32202	.	_
	Dahana Forgues			2024 HAT
(b) ₋	Enter name of NEW Registered Agent and/or NEW Registered Office address:			The Tr
	Timer name of 141.74 Registered Agent and/or 141.74 Registered Office andress.			FILED FILED
	DHF NURSE, PLLC			7 10
	NEW Registered Office Address:			
	4540 NW 32nd Street			- 38
	Lauderdale Lakes	33319		•
nange gent v as/we ie arti	imited liability company is not organized under the later changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members of organization or the operating agreement of the	registere ability co of the lim limited li	d office and impany, it is ited liability iability com	d the business office of the registered thereby confirmed that the change(s) we company or as otherwise provided in
C:	ure of a member of authorized representative of a member	Dah ——	ana Forgues	District Constitution of Constitution
	\mathcal{C}		t., 461	Printed or typed name of signee
rovisi	by accept the appointment as registered agent and agi ons of all statutes relative to the proper and complete igations of my position as registered agent as provide	performa	mce of mv ϵ	luties, and I am familiar with and accep

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00